

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00569905 </div>
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name of Payee CAMPAIGN FUNDING DIRECT, INC.			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	
Mailing Address 1420 SPRING HILL ROAD SUITE 490			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2014.00</div>	
City MC LEAN	State VA	Zip Code 22102-3028	Transaction ID : SE24.372 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	
Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004		
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">91514.00</div>				

Full Name of Payee MDI IMAGING & MAIL			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	
Mailing Address 21955 CASCADES PARKWAY			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">32700.00</div>	
City DULLES	State VA	Zip Code 20166-9211	Transaction ID : SE24.398 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">03</div> <div style="border: 1px solid black; padding: 2px;">23</div> <div style="border: 1px solid black; padding: 2px;">2015</div> </div>	
Purpose of Expenditure DIRECT MAIL - POSTAGE		Category/ Type 004		
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">124214.00</div>				

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">34714.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

12

01

2015

Signature